

Provider Inspection Summary
For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Facility Information

Facility Name: OHIO HOUSE (0008786)

Address: 3309 S 112TH ST, WEST ALLIS, WI 53227

License Status: REGULAR

Licensed/Certified/Registered 03/01/2000

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096053 **End Date:** 10/26/2005 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008880 Served 12/19/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.13(4)(a)	COMMUNICABLE DISEASE CONTROL		
83.41(9)	CLEANLINESS OF ROOMS		
83.42(3)(b)	EMERGENCY PLAN POSTED		

Survey ID: 0091691 **End Date:** 11/24/2003 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008643 Served 12/18/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.13(4)(a)	COMMUNICABLE DISEASE CONTROL	09/26/2001	Yes
83.14(1)(d)	FIRE SAFETY, FIRST AID & CHOKING	10/26/2005	Yes
83.33(2)(g)1	HEALTH MONITORING-COMMUNICABLE DISEASE	10/26/2005	Yes
83.41(10)(b)	MECHANICALS IN GOOD REPAIR	10/26/2005	Yes
83.41(9)	CLEANLINESS OF ROOMS	10/26/2005	No

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Provider Inspection Summary
For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
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Survey ID: 0090611 **End Date:** 06/17/2003 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10006808 Served 07/15/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(bb)	DETERMINE FINAL DISPOSITION OF CHARGE	11/20/2003	Yes
50.065(2)(bm)	OUT OF STATE BACKGROUND CHECKS	11/20/2003	Yes
83.21(4)(w)	SAFE ENVIRONMENT	11/20/2003	Yes
83.33(2)(g)1	HEALTH MONITORING-COMMUNICABLE DISEASE	10/26/2005	Yes
83.33(3)(e)5	MEDICAL RECORD DOCUMENTATION	11/20/2003	Yes
83.35(5)(c)	FROZEN AT 0 DEGREES F. OR BELOW	11/20/2003	Yes
83.41(10)(b)	MECHANICALS IN GOOD REPAIR	10/26/2005	Yes
83.41(5)(d)2	HOT WATER TEMPERATURES	11/20/2003	Yes
83.41(9)	CLEANLINESS OF ROOMS	11/20/2003	No
83.51(3)(b)	CHUTES SHALL HAVE SELF-CLOSING DOORS	11/20/2003	Yes

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Enforcement History

Date: 12/16/2005 **SOD #10008880** **Appealed: No**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT
FORFEITURE---83.13(4)(a)
FORFEITURE---83.41(9)

Date: 12/16/2003 **SOD #10008643** **Appealed: No**

Sanctions

PROVIDE TRAINING
FORFEITURE---83.14(1)(d)
FORFEITURE---83.33(2)(g)1
FORFEITURE---83.41(10)(b)
FORFEITURE---83.41(9)

Date: 07/11/2003 **SOD #10006808** **Appealed: No**

Sanctions

OTHER SANCTION
FORFEITURE---83.35(5)(c)

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